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# **The President's Emergency Plan for AIDS Relief: Support for Orphans and Vulnerable Children**

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## The President's Emergency Plan

- President's State of the Union Address, 2003
- 5-year, \$15 billion, multi-faceted program to fight HIV/AIDS
- Largest international health initiative in history dedicated to a single disease, working in partnership with international, national, and local leaders to expand **prevention**, **treatment**, and **care** programs
- Represents a “new way of doing business”



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## New Way of Doing Business

- One integrated USG bilateral program:  
Departments of State, Defense, Commerce, Labor,  
Health and Human Services (Including CDC, FDA, NIH,  
and HRSA), USAID, Peace Corps
- Results-oriented
- Network Model promotes linkages between  
prevention, treatment and care
- Guiding principle: success depends on building  
local capacity and leveraging all sectors of society



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## The Focus Countries

- The U.S. is focusing \$9 billion in new resources in 15 of the most afflicted countries in the world
- Together, these countries represent about 50 percent of all HIV infections worldwide
- Supports national strategies to bring programs to scale:
  - Prevent **7 million** new infections
  - Provide treatment to **2 million** HIV-infected people
  - Care for **10 million** people infected and affected by HIV/AIDS including orphans and vulnerable children



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## Focus Country Programs

- Five year strategy and targets provide road map
- Annual Country Operational Plans (COPs)
  - Annual funding allocation
  - Plans developed in-country in collaboration with partners, core teams, and other donors
  - Reviewed by interagency panel, approved by Ambassador Tobias
- Supported by inter-agency “core” teams at headquarters
- “Track 1” HQ grantees integrated into country programs



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## Overall Emergency Plan Coordination

### Host Government

#### In-Country Partners

Donors  
Implementing partners  
Other stakeholders

#### USG Country Team

U.S. Ambassador  
Embassy staff  
HHS/CDC  
USAID  
DoD  
DOL  
Peace Corps

#### O/GAC Headquarters

Ambassador Tobias  
Principals  
Deputy Principals  
Core teams  
Technical Working Groups  
Agency Support



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## Global Results thru September 2004

- 155,000 people received ART
- 1.2 million women received PMTCT services
- 120 million reached by prevention messages
- 1.7 million people infected and affected by HIV/AIDS received care and support
- Includes 630,200 Orphans & Vulnerable Children
- 1,200+ partners (over 80 percent indigenous)



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## Support to Orphans and Vulnerable Children

- OVC programs in all 15 focus countries: In FY 06, 10% “earmark” for OVC
- Support programs within the context of national OVC strategy and PEPFAR five-year strategy
- Linkages between care, treatment and prevention are central
  - OVC programs as a means to bring children into treatment: 4,800 children reached
  - Importance of prevention to vulnerable children





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## Apply Lessons from Previous OVC Programming

- Best interest of the child must drive our work
- Vulnerability goes beyond double and single orphans to children with sick parents and others
- Local communities best able to identify vulnerable children; challenge is to identify children affected by AIDS without increasing stigma
- Adolescents constitute 55 percent of OVC
- Vulnerable children and youth have multiple related needs but services often lack integration



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## **Build on Shared OVC Strategies**

1. Strengthen the capacities of families
2. Mobilize and strengthen community-based responses
3. Ensure access to comprehensive services
4. Ensure that Governments protect the most vulnerable
5. Raise awareness to create a supportive environment



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## **Community and Family Capacities**

- Placing family and households at the center
- Forming community assistance committees
- Implementing local granting mechanisms



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## **Access to Comprehensive Services**

- Economic Strengthening
- Education
- Food and Nutritional Support
- Health Care
- Psycho-social Support
- Integrated HIV/AIDS Services
- Housing/Shelter
- Protection and Legal Aid
- Other Social and Material Support



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## Support Government Response

- Move from focus on individual programs to strengthening systems and structures, especially:
  - National Plans of Action
  - National Coordination and Policy
  - Monitoring and Evaluation
- System and structure strengthening is vital to scale up, sustainability and integration of services
- Need to balance long-term systems strengthening with short-term need for delivery of essential services



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## Supportive Context

- Reduce HIV/AIDS-related stigma and discrimination
- Build on traditional structures for orphan care
- Advocate for enacting and enforcing child protection policies and laws



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## Emergency Plan OVC Challenges

- Focus of PEPFAR on children affected by AIDS; need to leverage complementary resources from other sectors to address broader needs of local communities
- Most vulnerable are hardest to reach: children caring for sick parents, street children
- Address orphaned and vulnerable adolescents and involve them in finding solutions to their unique needs
- Attention to gender equity in service provision



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## Emergency Plan OVC Challenges, contd.

- Maintain quality as we scale-up, establish standards for service delivery
- Improve measurement: refine “child served” indicator, measure improved well-being of beneficiaries
- Devolve resources to local communities and strengthen capacity of local-level partners
- Coordinate OVC services across agencies and sectors
- And more coordination—across USG partners, with host governments, with other donors and partners





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# Where to now.....

Collective Action  
Concern for Quality Care  
Innovation



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# Thank You!

